



# CITY OF GLENDALE — BUILDING AND SAFETY

633 E. Broadway, Room 101 Glendale, CA 91206

(818) 548-3200, (818) 5484837 (Inspection)

## PLUMBING PERMIT WORKSHEET

Please complete the section below clearly, legibly and in ink.

### Permit No. BP

<b>Job Address ( Include Zip Code )</b>				<b>Work Description ( Fill all that apply and specify quantity )</b>			
<b>Permit Information</b>				<input type="checkbox"/> \$33.00 Issuance Fee			
Is this work related to a Building Permit <input type="checkbox"/> Yes <input type="checkbox"/> No		Has work started? <input type="checkbox"/> Yes <input type="checkbox"/> No (Double the permit fee will be charged for legalization )		<input type="checkbox"/> Technological Surcharge of 10% will Apply to Permit and Plan Check Fees			
<b>Describe where the work will be done &amp; fill out the work description on the right side of this application.</b>				<input type="checkbox"/> \$33.00 Supplemental Permit to			
				<input type="checkbox"/> \$38.00 Minimum Inspection Fee ( If fees below add up to less than \$38.00)			
<b>Applicant 's Name</b>				<input type="checkbox"/> \$ Plan Check ( 50% of Permit Fee, Minimum of \$72.00)			
				<input type="checkbox"/> \$11.00 Toilet			
<b>Address ( Include City and Zip Code )</b>				<input type="checkbox"/> \$11.00 Sink			
				<input type="checkbox"/> \$11.00 Bathtub			
<b>Property Owner's name</b>				<input type="checkbox"/> \$11.00 Shower/Shower Pan			
				<input type="checkbox"/> \$11.00 Garbage Disposal			
<b>Address (Include City &amp; Zip Code)</b>				<input type="checkbox"/> \$11.00 Clothes Washer			
				<input type="checkbox"/> \$11.00 Dishwasher			
<b>E-Mail Address</b>				<input type="checkbox"/> \$17.20 Residential Water Softener			
				<input type="checkbox"/> \$7.70 Lawn Sprinkler System			
<b>Licensed design professional or engineer Information:</b>				<input type="checkbox"/> 0 - 5 (Vacuum Breaker)			
				<input type="checkbox"/> \$11.00 Drinking Fountain			
<b>Name</b>				<input type="checkbox"/> \$22.50 Water Heater (each and/or vent)			
				<input type="checkbox"/> \$11.00 Floor Drain (*) or Drain			
<b>Address (Include City &amp; Zip Code)</b>				<input type="checkbox"/> \$11.00 Urinal			
				<input type="checkbox"/> \$11.00 Other Fixtures			
<b>E-Mail Address</b>				<input type="checkbox"/> \$11.00 Exterior Water Service, New or Replacement			
				<input type="checkbox"/> \$22.50 Boiler Steam or Hot Water			
<b>APN</b>				<b>Industrial Equipment</b>			
<b>Tract</b>				<input type="checkbox"/> \$72.00 Industrial Waste Interceptor (*)			
<b>NAICS/Structure Use</b>				<input type="checkbox"/> \$72.00 Grease Trap (*)			
<b>Floor Area</b>				<input type="checkbox"/> \$5.50 Backflow Protective Device, Each			
<b>Above Grade</b>				<input type="checkbox"/> \$28.00 Dental Chairs, Each (*)			
<b>Below Grade</b>				<input type="checkbox"/> \$28.00 Special Equipment, Per Piece of Equipment (*)			
<b>Mezz</b>				<input type="checkbox"/> \$11.00 Miscellaneous Items, Each			
<b>Type of Const.</b>				<b>Re-pipes (Single Family Dwelling) WATER SYSTEMS ONLY</b>			
<b>Fire Sprinkler</b> <input type="checkbox"/> Yes <input type="checkbox"/> No				<input type="checkbox"/> \$33.00 1 Bathroom			
<b>Edition of the Code</b>				<input type="checkbox"/> \$49.50 2 Bathrooms			
<b>CALIFORNIA LICENSED CONTRACTOR'S DECLARATION: I herby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.</b>				<input type="checkbox"/> \$67.00 3 Bathrooms			
				<input type="checkbox"/> \$83.00 4 or More Bathrooms			
<b>Contractor's Name</b>				<b>Re-pipe (Multi-Family Dwelling - Per Unit) WATER SYSTEMS ONLY</b>			
<b>Phone</b>				<input type="checkbox"/> \$67.00 2 Bathrooms or less (Per Dwelling Unit)			
<b>Address (Include City &amp; Zip Code)</b>				<input type="checkbox"/> \$83.00 Greater than 2 Bathrooms (Per Dwelling Unit)			
<b>E-Mail Address</b>				<b>Re-pipe (Non - Residential - Per Floor or Story) WATER SYSTEMS ONLY</b>			
<b>State License No.</b>				<input type="checkbox"/> \$83.00 Less Than 10,000 Sq. Ft. (Per Floor or Story)			
<b>Exp. Date</b>				<input type="checkbox"/> \$167.00 10,001 Sq. Ft. - 100,000 Sq. Ft. (Per Floor or Story)			
<b>City License No.</b>				<input type="checkbox"/> \$277.00 Greater Than 100,000 Sq. Ft. (Per Floor or Story)			
<b>Exp. Date</b>				<b>Plumbing Group</b>			
<b>Contractor's Signature</b>				<input type="checkbox"/> \$217.06 Multi-Family: Kitchen + # Bathroom(s)			
<b>FOR OFFICE USE ONLY</b>				<b>Gas Systems</b>			
				<input type="checkbox"/> \$11.00 Low Pressure, Each Outlet			
<b>Comments</b>				<input type="checkbox"/> \$72.00 Medium Pressure, Added to Outlet Charge (*)			
				<input type="checkbox"/> \$72.00 Proprietary System, Added to Outlets			
				<b>Drain &amp; Waste Systems</b>			
				<input type="checkbox"/> \$28.00 Building Sewer			
				<input type="checkbox"/> \$38.00 Sewer Connection C #			
				<input type="checkbox"/> \$11.00 Repair Drain Line, Per Fixture on Line			
				<input type="checkbox"/> \$72.00 Sewer Cap / Cesspool			
				<input type="checkbox"/> \$11.00 Rainwater System, For Each Drain Inside The Building			
				<input type="checkbox"/> \$17.00 Sump Pump / Sewer Ejector			
				<input type="checkbox"/> \$7.70 Temperature and/or Pressure Relief Valve / Hi-Temp Limit Device			
				<input type="checkbox"/> \$ Other (Refer to Fee Schedule)			
				<b>Note:</b> Any item having this mark ( * ) may require plan check for multi-family ( 3 or more units ) & commercial buildings. (Any combination of 10 new fixtures; facilities requiring Health Dept. or Industrial Waste approval, i.e. medical & dental facilities restaurants, markets, and any establishment that sells or prepares food on or off site; and systems with sewage ejection pumps/industrial waste interceptor)			
<b>P.C. Processed By</b>		<b>Date:</b>		<b>Receipt No.</b>			
<b>Processed By</b>		<b>Date:</b>		<b>Receipt No.</b>			

PERMIT NO.

INSPECTIONS	APPRVD	DATE
PRESITE		
SHORING		
SETBACKS AND YARDS		
UFER		
TRENCH AND FORMS REINFORCING STEEL		
SETBACK & ELEVATION SURVEY		
OK TO POUR FOOTINGS		
<b>DO NOT POUR FOOTINGS UNTIL ABOVE IS APPROVED</b>		
OK TO GROUT CMU / P.I.P.		
OK REBAR SHOTCRETE WALL		
HVAC GROUNDWORK / U.F.		
ELECTRICAL GROUNDWORK / U.F.		
PLUMBING GROUNDWORK / U.F.		
GAS PIPING GROUNDWORK / U.F.		
FIRST FLOOR JOISTS		
UNDER FLOOR INSULATION		
OK TO POUR SLAB FLOOR		
<b>DO NOT POUR CONCRETE FLOOR SLAB OR COVER FIRST FLOOR JOISTS UNTIL ABOVE IS APPROVED</b>		
ROUGH ELECTRIC		
ROUGH PLUMBING		
DUCTS		
ROUGH HEATING OR REFRIG.		
ROUGH GAS PIPING		
ROOF SHEATHING		
ROUGH FRAMING AND ROOF		
ALARM ROUGH		
FLOOR NAILING		
T-BAR <input type="checkbox"/> Mechanical <input type="checkbox"/> Electrical		
INSULATION		
OK TO COVER		
<b>DO NOT COVER UNTIL ABOVE IS APPROVED</b>		
LATHING <input type="checkbox"/> Interior <input type="checkbox"/> Exterior		
DRYWALL		
BROWN COAT <input type="checkbox"/> Interior <input type="checkbox"/> Exterior		
SEWER - SEPTIC / TANK - CESSPOOL		
SERVICE RELEASE		
FINAL GAS		
FINAL PLUMBING		
FINAL ELECTRICAL		
FINAL HEATING OR REFRIGERATION		
ENERGY FINAL		
LANDSCAPE FINAL		
GRADING FINAL		
ELECTRICAL SERVICE RELEASE		
FINAL-ENGINEERING		
FINAL SPRINKLER		
FINAL CENTRAL STATION		
FINAL FIRE ALARM		
FIRE PREVENTION FINAL		
<b>FINAL BUILDING INSPECTION</b>		

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